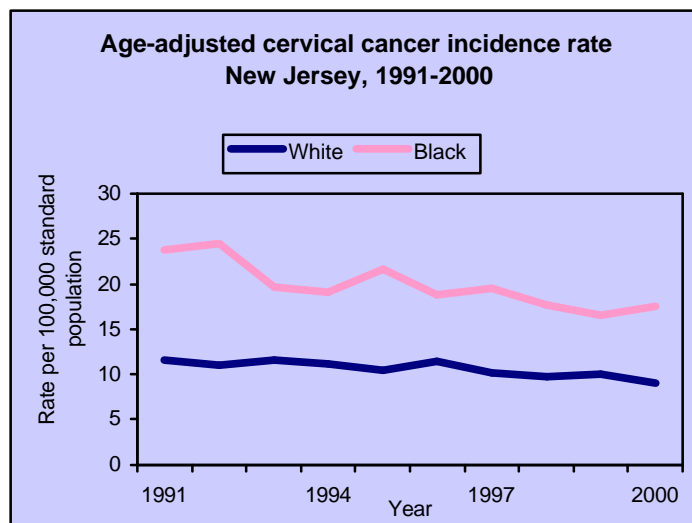




MONTHLY HEALTH DATA FACT SHEET January 2004

January is Cervical Health Awareness Month

- Each year in New Jersey, over 450 women are diagnosed with invasive cervical cancer and over 100 die from this disease.
- Cervical cancer begins in the lining of the cervix, where normal cervical cells gradually undergo precancerous changes that eventually become cancer.
- In 2000, New Jersey women aged 70-74 had the highest incidence rate of invasive cervical cancer (22.5 per 100,000 women or 36 cases) while women aged 25-29 had the lowest (7.7 per 100,000 women or 21 cases).
- Incidence rates for invasive cervical cancer are higher for blacks than they are for whites (17.5 versus 9.0 per 100,000 women in 2000). While the age-adjusted incidence rate declined from 13.0 in 1991 to 9.8 in 2000, the decline was far greater among blacks than among whites.



- Cervical cancer death rates are also higher among blacks than for whites. There were 150 deaths from cervical cancer in New Jersey in 2001, resulting in age-adjusted death rates (per 100,000 women) of 3.1 for whites (n=123) and 4.4 for blacks (n=25).
- Since 1991, death rates from cervical cancer have declined 43 % among blacks, while remaining roughly constant among whites.
- The risk factors for cervical cancer include: human papillomavirus infection (HPV), smoking, HIV infection, chlamydia infection, a diet low in fruits and vegetables, extended oral contraceptives use, multiple full term pregnancies, low socioeconomic status, mother's use of diethylstilbestrol (DES) and family history.
- Of the above risk factors, HPV is the most important since it is believed that all women who develop cervical cancer are infected with HPV. The risk factors specific to an increased susceptibility to HPV infection include: intercourse at an early age, having many sexual partners and having intercourse with an uncircumcised male.
- The way to test for cervical cancer and HPV infection is with a Pap test, a screening procedure in which cells are obtained from the cervix for testing. It is recommended by the American Cancer Society that women begin receiving this screening within 3 years of their first sexual intercourse, but no later than age 21. Regular screening is recommended since cervical cancer is highly treatable if diagnosed early.
- The American Cancer Society guidelines advise that once women begin screening, they should get tested every year. Once a woman reaches 30 and has had 3 normal pap tests in a row, she may now be screened every 2 to 3 years, unless she

has certain risk factors. Also, once a woman reaches the age of 70 and has had no abnormal Pap tests in the past 10 years, she may stop testing altogether, provided that she does not have certain risk factors such as a history of cervical cancer or a weakened immune system.

- In 2002, 85% of women aged 18 and over (with no history of a hysterectomy) in New Jersey reported they had a Pap test within the past three years with 69% reporting having a Pap test within the past year. Also, 93% of New Jersey women report that they have had a Pap test at some time in the past. (These estimates are age-adjusted based on the year 2000 standard population.)
- Women aged 35-49 are most likely to reporting having a Pap test in the past year while women aged 65 and older are least likely to report having this procedure (75% versus 50% respectively).
- From 1992 to 2002, there was a decline of 29% in the number of women who reported not having a Pap test within the previous 3 years.
- There are three standard treatments for cervical cancer: surgery, radiation therapy, and chemotherapy.

For more information on cervical cancer in New Jersey: New Jersey Department of Health and Senior Services
[Office of Cancer Control and Prevention](#)

For more information on cancer in the United States: [National Cancer Institute](#)

For information specific to cervical cancer: Centers for Disease Control and Prevention
[The National Breast and Cervical Cancer Early Detection Program](#) or
[National Cervical Cancer Coalition](#)

For general information on cancer, including support groups: [American Cancer Society](#)

Sources:

American Cancer Society
[Cancer Reference Information](#)

New Jersey Department of Health and Senior Services
Office of Cancer Epidemiology
NJ State Cancer Registry, unpublished 1991-2000 incidence data
[Cancer Among Hispanics in New Jersey, 1990-1996](#)
[Center for Health Statistics](#)
New Jersey Behavioral Risk Factor Survey, 2002
Unpublished mortality data 1991-2001
Office of Cancer Control and Prevention, [Cervical Cancer](#)
Family Health Services, New Jersey Cancer Education and Early Detection Services,
[Recommendations Regarding Screening](#)



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